

4 AREAS OF TELEHEALTH TEACHING

4 AREAS OF TELEHEALTH TEACHING

- There are 4 areas that you can work on to improve the telemedicine clinical experience for your trainees

Facilitate
Learning

Optimize
Logistics

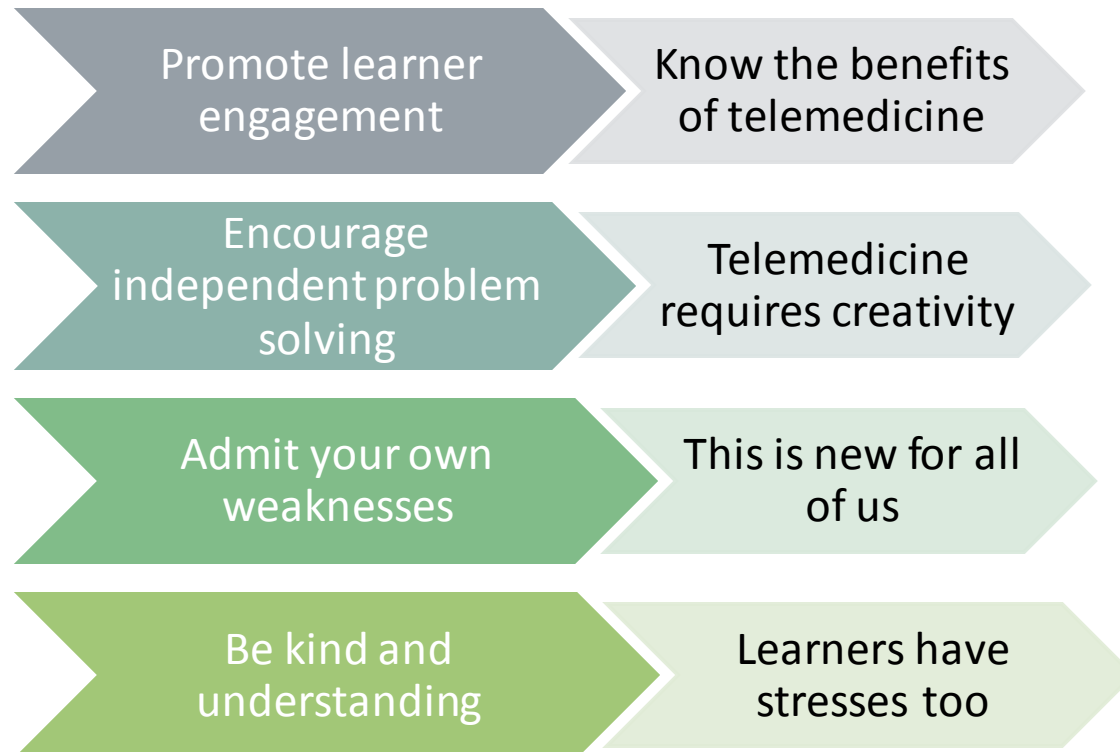
Build
Skills

Innovate

AT THE START OF THE SESSION

- Create a good learning climate

Adult Learning theory



PREPARATION

- Attendings
- Residents/Fellows
- Students

- Review ACP Telemedicine 101 materials
 - Free content for all on the ACP website
- Provide hand-outs or video links on:
 - setting up for a visit
 - webside manner
 - virtual physical exam



1. setting up



2. webside manner



3. virtual exam

PREPARATION

The screenshot shows a digital interface for 'Chapter 19 - Telemedicine Through the EHR System'. The main heading is 'Setting Up the Visit'. Below the heading, there is a paragraph: 'The goal of a high-quality Telemedicine virtual visit is to provide excellent and appropriate medical care in an empathetic manner.' followed by another paragraph: 'It is essential to ensure that our patients are comfortable, feel satisfied with the consultation, and have all their questions addressed during a Telemedicine visit just as they are during an in-person visit.' The interface includes a sidebar on the left with a search icon, a progress bar showing '2% COMPLETE', and a list of topics: 'PURPOSE, OBJECTIVES, AND CME' (with sub-items 'Information and CME Instructions' and 'Purpose and Objectives'), 'INTRODUCTION TO TELEMEDICINE' (with sub-items 'Questions about Telemedicine', 'Why Telemedicine?', and 'Definitions and Types of Telemedicine'). The ACP logo is visible in the center of the page.

- Review ACP Telemedicine 101 materials
 - Free content for all on the ACP website
- Provide hand-outs or video links on:
 - setting up for a visit
 - webside manner
 - virtual physical exam



1. setting up



2. webside manner



3. virtual exam

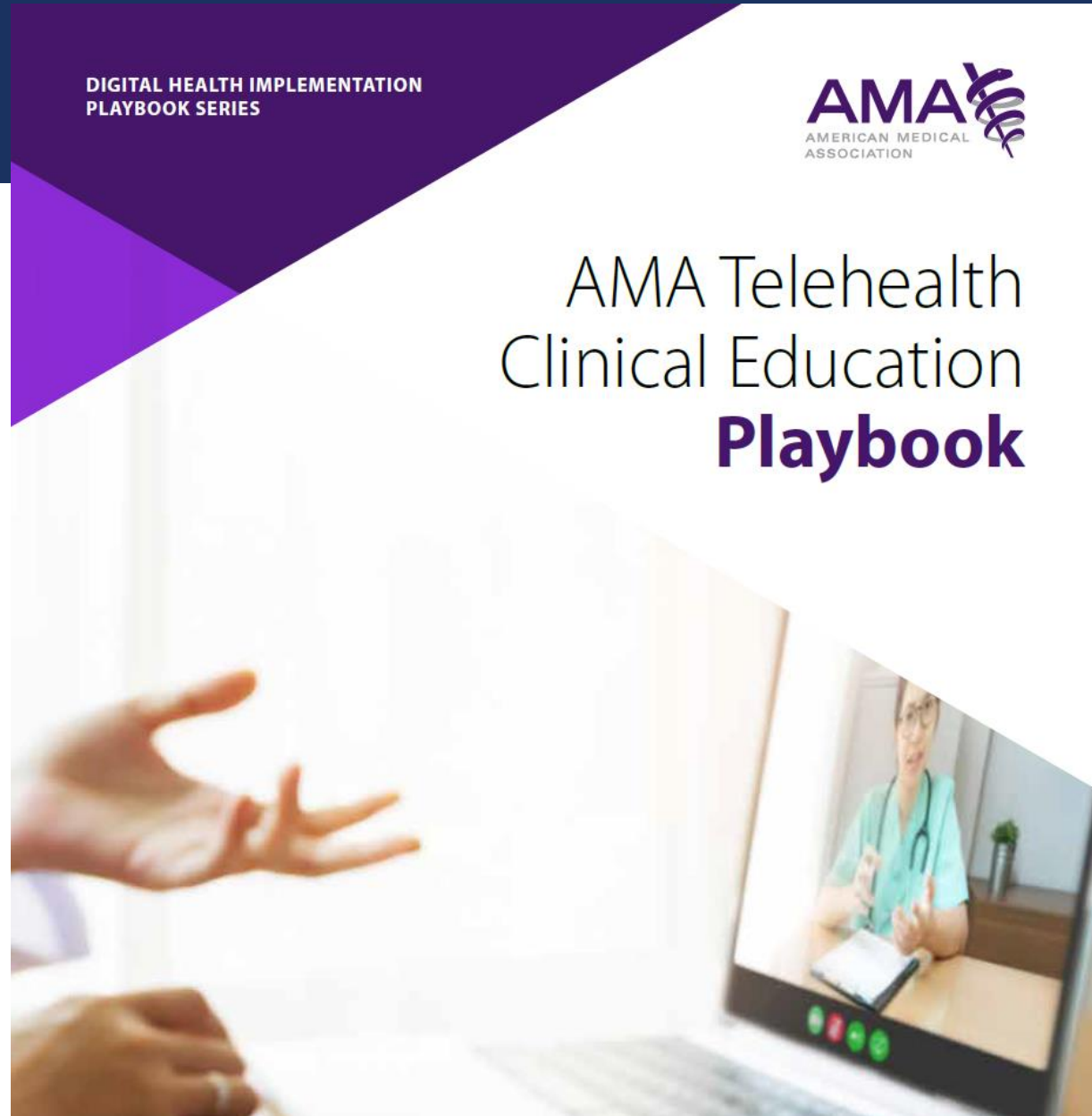
PREPARATION

DIGITAL HEALTH IMPLEMENTATION
PLAYBOOK SERIES



AMA Telehealth Clinical Education **Playbook**

- Telehealth Clinical Education Playbook by Mishra, V et al.



EMORY
UNIVERSITY
SCHOOL OF
MEDICINE

4 AREAS OF TELEHEALTH TEACHING

- Create a favorable learning environment
- Assign pre-reading for preparation

Facilitate
Learning

Optimize
Logistics

Build
Skills

Innovate

THE FIRST DAY – OPTIMIZE LOGISTICS

- A first year medical resident is assigned to your clinic for a rotation. On their assigned day, you are seeing mostly virtual visits. Your resident arrives for their first session. This is his first experience with video visits.
- What logistics do you like to review with him?



THE FIRST DAY HUDDLE



- Meet in person if possible
- Exchange cell phone numbers
- Identify co-location procedures
 - learner and preceptor co-located in-person, patient remote
 - learner, preceptor, and patient remote in separate or same locations
- Determine learner role: HPI vs complete visit, charting?

LEVEL OF SUPERVISION

- Degree varies based on your learner and your comfort level
- Review during visit consultation process
 - Secure messaging, raise hand, texting, muting patient to speak by phone
- How to staff visits with you
- Optional
 - Provide telemedicine dot phrases or templates
 - Review preceptor expectations re: telehealth etiquette, setting, lighting, attire, etc.
 - Review essential scripts, including patient consent and privacy.

SET EXPECTATIONS

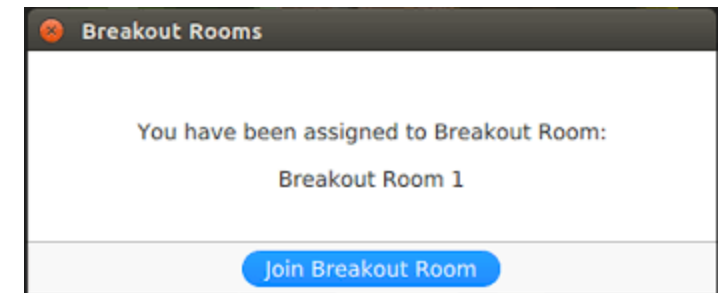
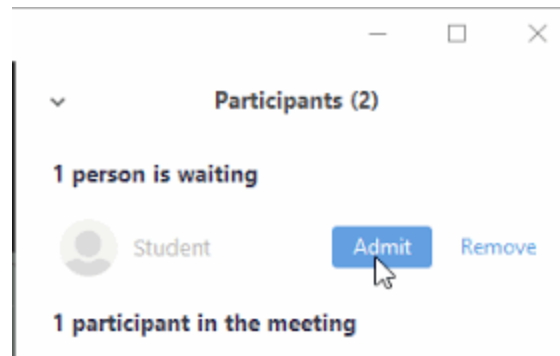
- Suggest that residents/fellows huddle with their staff for 5 minutes at the start of their session.
- Huddle with you for 5 minutes at the start of every session to discuss flow
- Plan to debrief with trainee for 10 minutes at the end of the day



REVIEW TELEMEDICINE VISIT TECHNOLOGY

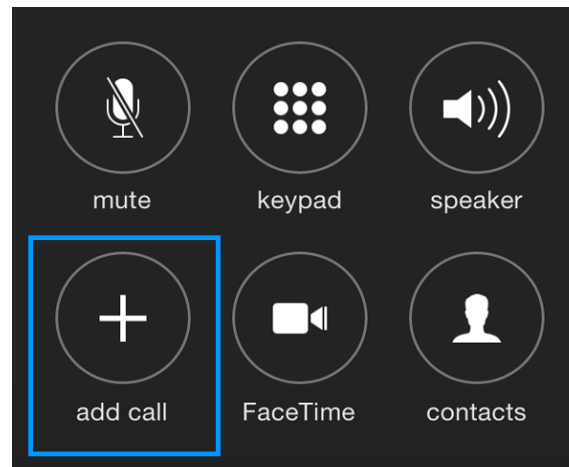
- Video platform

- Waiting rooms
- Break-out rooms



- Telephone visits

- Three-way calls
- Blocking caller ID
- Other apps



TELEMEDICINE VISIT TECHNOLOGY

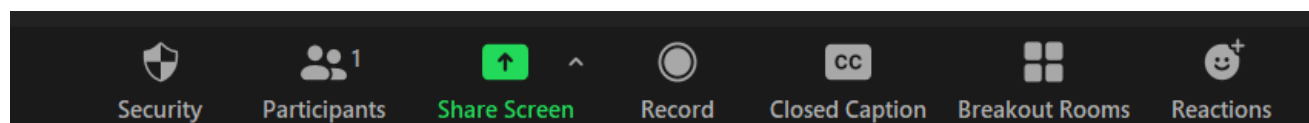
Learner uses preceptor Zoom ID

- Preceptor and learner start the visit together
- Preceptor leaves and learner gathers information
 - Assign the learner as the meeting host
 - Break-out rooms: Assign the learner and a patient into a room
- Learner contacts the preceptor when ready to precept or preceptor joins at a predetermined time in the visit

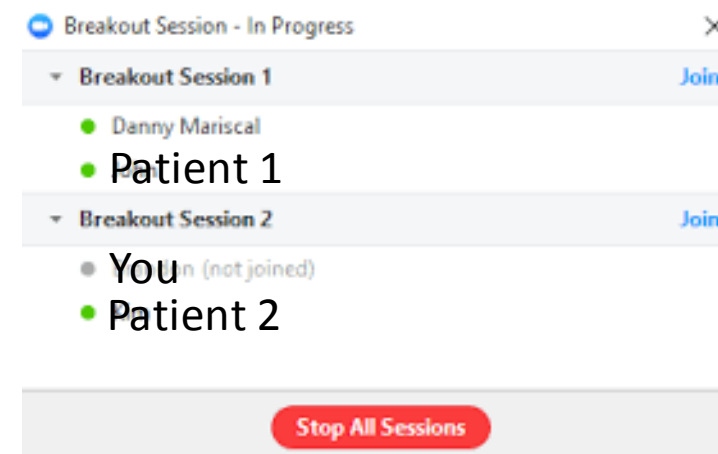
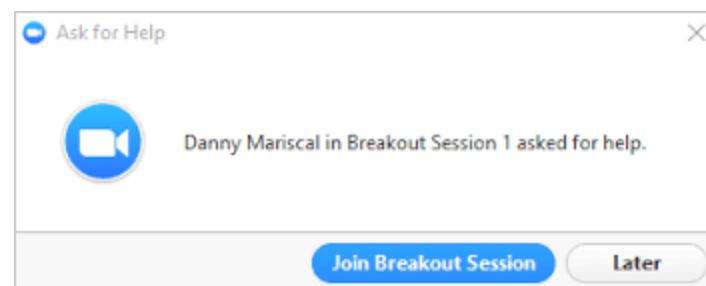
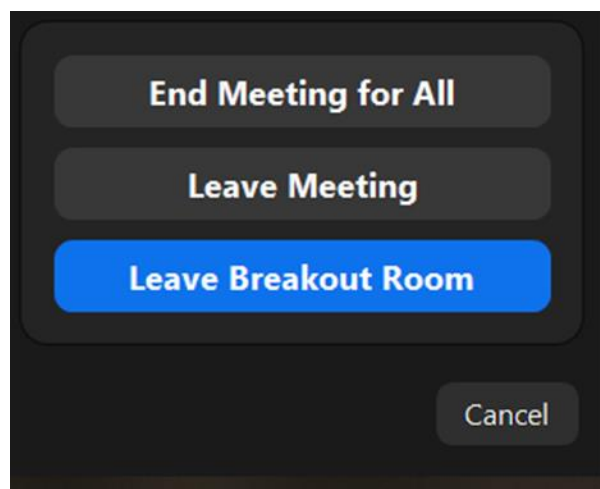
Learner uses personal Zoom ID

- Patient is given learner's personal Zoom ID
- Learner initiates the visit
- Learner contacts the preceptor when ready to precept or preceptor joins at a predetermined time in the visit
- Preceptor joins using learner's Zoom ID

ZOOM BREAKOUT ROOMS



- <https://www.youtube.com/watch?v=jbPpdyn16sY>



TELEMEDICINE VISIT TECHNOLOGY

EMORY
UNIVERSITY
SCHOOL OF
MEDICINE

MyChart

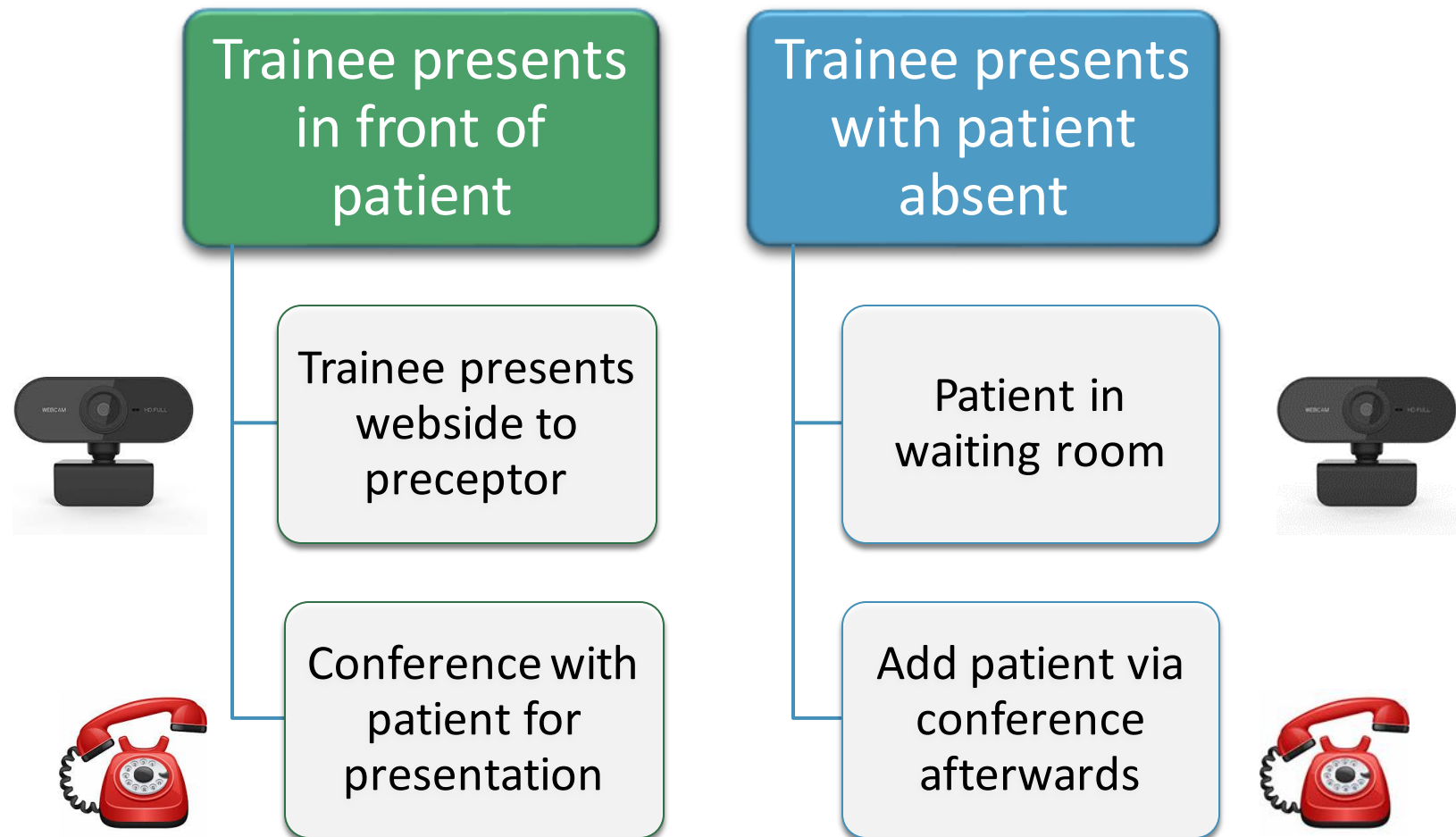


PLAN FOR TECHNOLOGY FAILURES

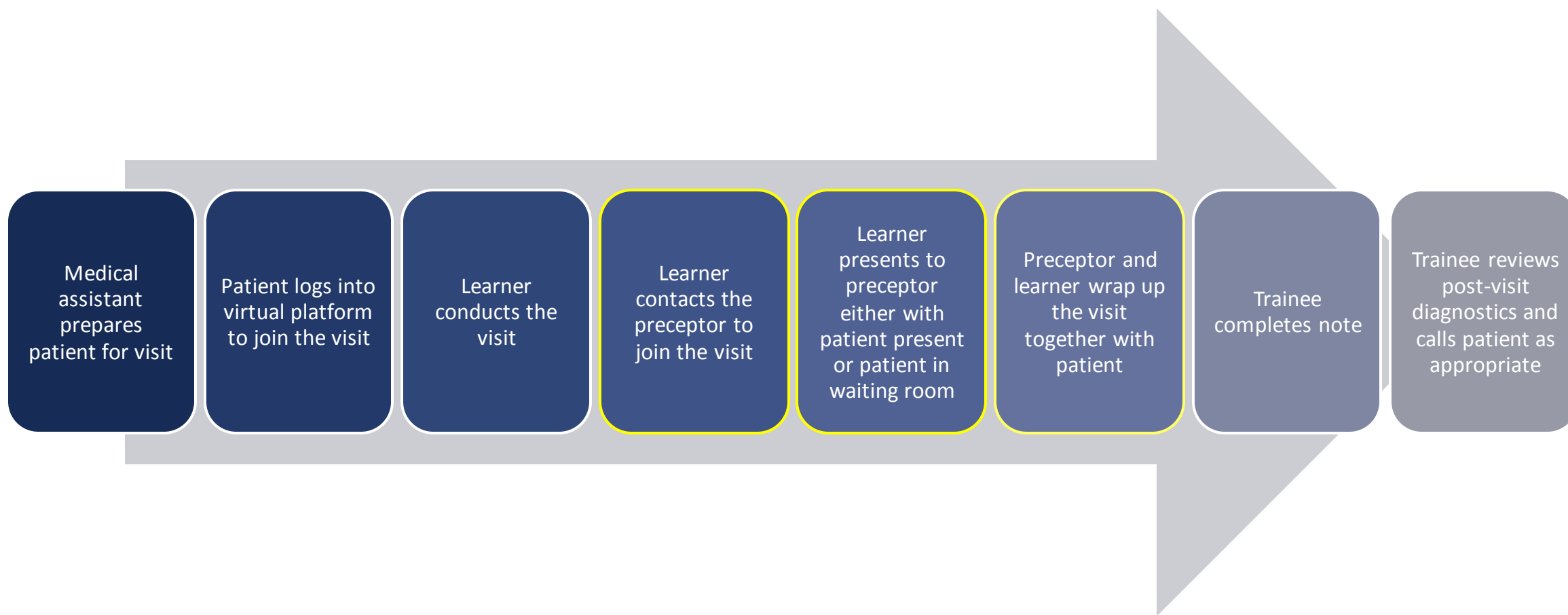
If	Then
patient is not on video visit	call the patient over the phone to troubleshoot
patient is lacking the information about how to join the visit	call or use patient portal to send patient the meeting ID or hyperlink
there are audio issues while on video	continue video and contact patient by phone for audio
patient is still having video connection issues	consider a phone visit
internet is unstable	convert to telephone visit

Do not spend
more than 5
minutes on this
before
contacting me

PRECEPTING STRATEGY



SAMPLE FLOW FOR A VIRTUAL VISIT WITH A RESIDENT/FELLOW

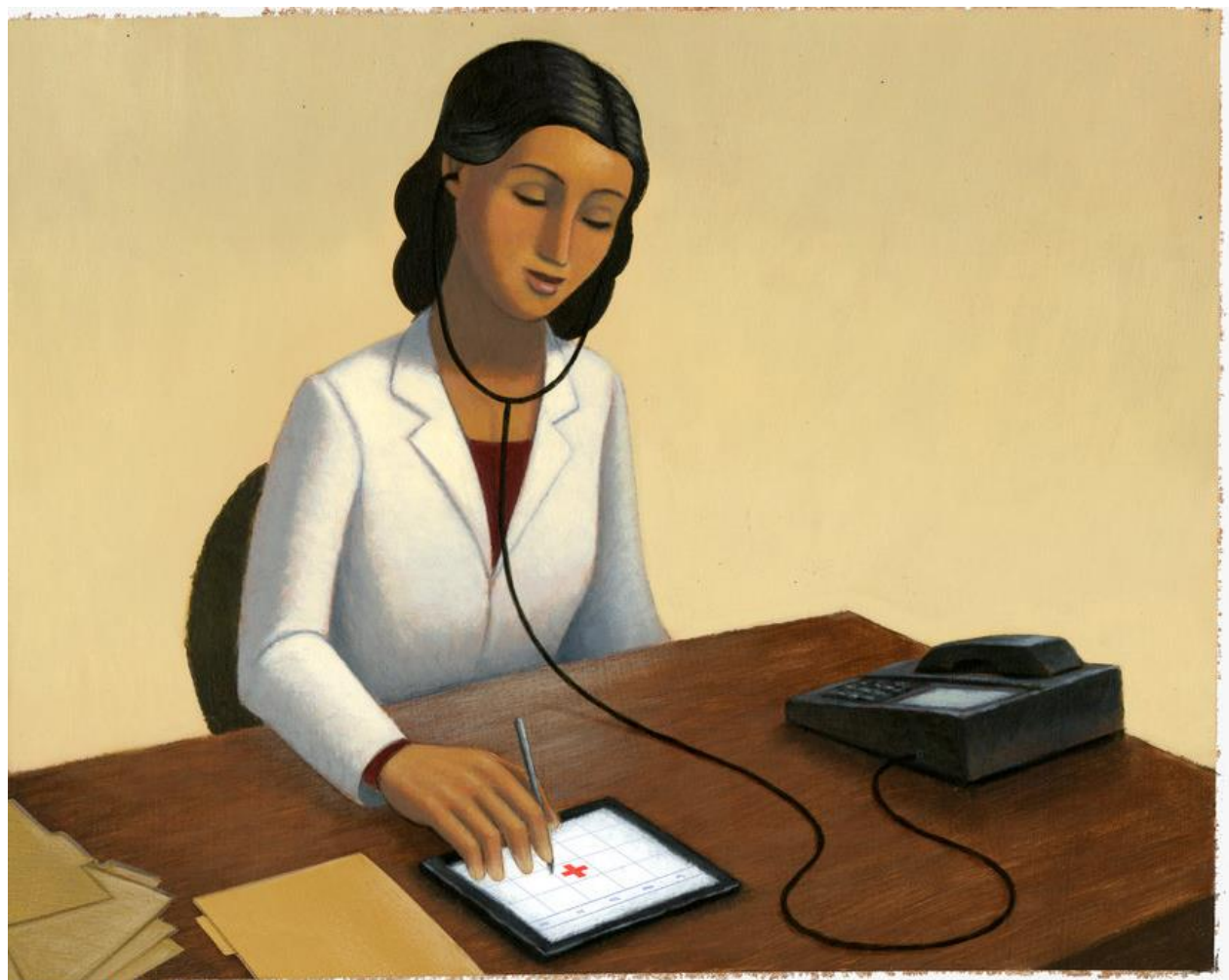


TELE-PRECEPTING FLOW – PATIENT PERSPECTIVE



- Discuss flow with trainees
- They should inform patients what will happen when they communicate with the preceptor
 - Will trainee call them back?
 - Will trainee put them on hold while on video-chat?
 - Will you discuss their case in front of them?
 - How long will the wait be?

ENDING THE TELEMEDICINE VISIT – PATIENT PERSPECTIVE



- How will patients get follow-up information? Hand-outs, prescriptions, etc?
- What is the process for labs? Vaccines?
- How can they reach the team if they have questions?
- Will their next visit be in person or virtual?
- How will they make this appointment?

4 AREAS OF TELEHEALTH TEACHING

- Set our trainees up for success during orientation, particularly with technology and flow
- Consider logistics from patient perspective as well

Facilitate
Learning

Optimize
Logistics

Build
Skills

Innovate

ONE MINUTE TELEPRECEPTOR

One minute preceptor	SNAPPS
Summarise the case	Summarise the case
Get a commitment 'What do you think is going on?'	Narrow the differential 'What are the diagnostic possibilities here?'
Probe underlying understanding 'What led you to this conclusion?'	Analyse the differential 'Why is this diagnosis likely/unlikely?'
Reinforce what was done well	Probe the teacher 'What question would you like to ask me?'
Teach general rules	Plan management
Correct errors	Select issue for self directed learning

Neher, J. O., Gordon, K. C., Meyer, B., & Stevens, N. A five-step "microskills" model of clinical teaching. *JABFM*. 1992; 5: 419-424.

Wolpaw T, Wolpaw D, Papp K. SNAPPS: A learner-centered model for outpatient education. *Academic Medicine*. 2003; 78(9): 893-898.

TEACHING AFTER THE TELEPHONE VISIT

Anything telemedicine is good teaching

Phone manner

- Demonstrating empathy
 - Verbal and non-verbal
- Using understandable language

Triage

- How to triage efficiently
- Understanding limits of telephone medicine
- How to prioritize who needs an in person visit

Counseling about self-management

- Survey patient's preferences
- Check patient's understanding

TEACHING AFTER THE VIDEO TELEVISIT

Anything telemedicine is good teaching

Webisode manner

- Working with others in the 'room'
- Demonstrating empathy
- Non-verbal communication
- Setting up the camera


Virtual physical exam

- How to engage patient in self-exam
- Demonstrate maneuver on self
- Use earlier photos for skin exam

Counseling about COVID-19

- Public health measures
- COVID-19 vaccines

TEACHING AFTER THE TELEVISIT - COMMUNICATION

- 
- An illustration of a person's head and hand. The person has brown hair and a large black eye. Their hand is raised, palm facing forward, with fingers spread. The background is a light blue circle with a teal border. The text is in a dark blue box.
- Communication skills are well-suited for teaching after a televisit
 - Distinct opportunity to pay attention to nuances in communication
 - Focus on body language, eye contact, speech patterns
 - History-gathering skills
 - Active listening skills
 - Relationship and trust-building skills

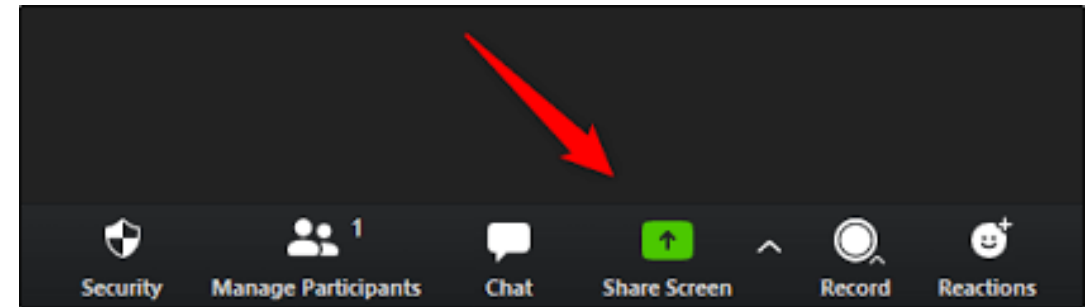
TEACHING AFTER THE TELEVISIT - COMMUNICATION

- Be explicit about your plans to observe
 - “I will be eavesdropping.”
 - Turn your camera off and mute yourself
 - What to tell patients?
 - you are observing the trainee for education purposes
 - you are taking care of something for a few minutes and will rejoin in 5 minutes

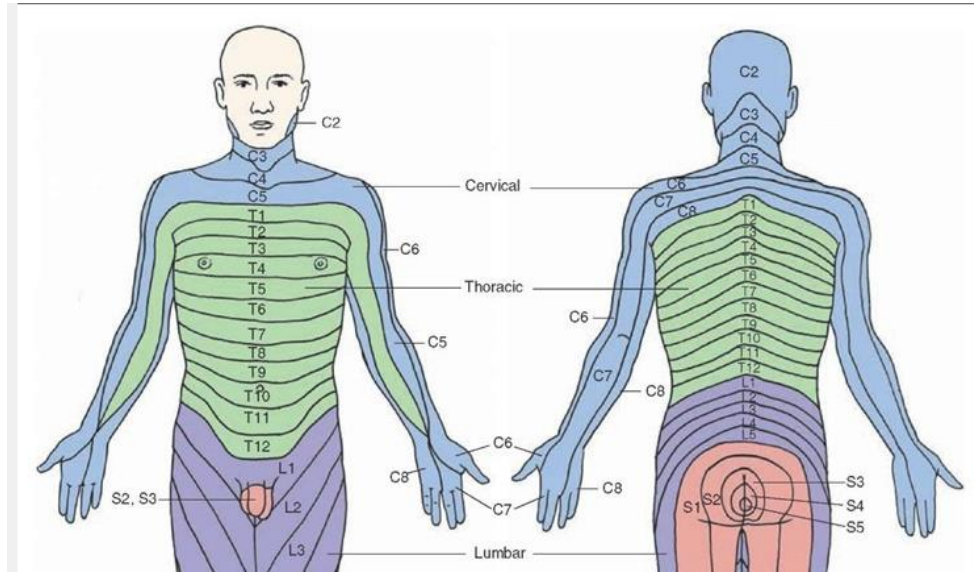


“I really liked the telemedicine clinic. Dr. R was able to directly witness my patient interactions which he was not able to do in clinic. I received a lot of helpful feedback in these sessions and it really helped guide my understanding of how to structure interviews.”

ONE WAY TO TEACH – TRY SHARE SCREEN



- Available on EPIC and ZOOM
- Shared screen can show patients their labs/results/charts or images
- Shared screen can show articles or resources for teaching



TEACHING DURING A TELEPHONE VISIT

- Open a virtual room for staffing
- Residents instant message or text to ask if you are ready
- They can also join virtual room at any time
- Position video frame close to your camera
 - This helps with eye contact
- You can see your trainee
- You can share screen with them
- You can have chart open while precepting.

DEBRIEF WITH TRAINEE

- 10 minute huddle at the end of clinic
- It may not be obvious that you are teaching while tele-precepting
 - Learning with the learner
 - Role modeling behavior
 - Getting creative during the exam



ALLOW TIME FOR ASYNCHRONOUS QUESTIONS

- How can you recreate the conference room or office drop-by?
- Made better if you and learner are co-located
- Encourage the debrief at the end of clinic
- Build your relationship with your learner



4 AREAS OF TELEHEALTH TEACHING

- Teach communication skills, clinical triage, and virtual physical exam.
- Debrief and get to know your trainee.

Facilitate
Learning

Optimize
Logistics

Build
Skills

Innovate